

Feedback on Women's and Children's Health Network (WCHN) Disability Access and Inclusion Plan (DAIP)

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Background and summary of recommendations

Thank you for the opportunity to provide feedback on the Women's and Children's Health Network (WCHN) draft Disability Access and Inclusion Plan (DAIP).

As South Australia's Commissioner for Children and Young People, it is my role to advocate at a systemic level for the rights, interests and wellbeing of all children and young people in South Australia, particularly those whose voices are not usually heard.

Children and young people, including those with disability or complex health needs, are the primary consumers of WCHN Disability Services, Child Protection Services and acute and community-based services, including across the Women's and Children's Hospital, the Child and Family Health Services (CAFHS) and the Child and Adolescent Mental Health Services (CAMHS).

The WCHN draft DAIP refers broadly to "consumers". While it may be assumed that this broad term encompasses children and young people, the draft DAIP does not provide a definition of who WCHN consumers are nor does it make any specific mention of children and young people.

It seems logical that the final WCHN DAIP specifically recognises children and young people as a group who are separate to adults and who require specific consideration and child friendly and child safe actions. Indeed, it is a requirement under the *Disability Inclusion Act (SA) 2018* (the Act) for DAIPs to address priority groups living with disability, including children.

For many young people with disability the idea of influencing decisions about their own lives is not an everyday part of their reality. Instead their lives are influenced by their access to funded supports, including SSOs and NDIS therapists, and the capacity of the adults around them. They are aware that they are heavily dependent on the adults in their lives to make decisions for them and about them. At the same time, they want to be listened to, treated with kindness, valued for their diversity as individuals, and encouraged to participate in and contribute to their communities.

Health services are in a privileged position of being able to support children and young people to be physically, mentally and emotionally healthy and be instrumental in giving effect to children's rights. My office makes the following recommendations to guide the final DAIP's implementation and promote the rights and participation of children and young people:

- 1. That the final DAIP recognises children and young people with disability as a priority group for engagement and outlines how children and young people with disability will be supported to participate in decision-making processes.**
- 2. That the final DAIP clarifies the purposes and risks associated with the proposed Disability Register.**
- 3. That the final DAIP includes actions to review any existing feedback and complaints mechanisms to ensure that they are child-friendly and accessible**

for children and young people with disability.

4. That the proposed review of Disability Awareness Training ensures that all staff training addresses the needs of children and young people with disability through trauma-informed and child-centred approaches.

If you would like to discuss anything further, please do not hesitate to contact me.

Yours sincerely,



Helen Connolly
Commissioner for Children and Young People

Submission

- 1. That the final DAIP recognises children and young people with disability as a priority group for engagement and outlines how children and young people will be supported to participate in decision-making processes.**

This Office is aware that WCHN has a strong youth engagement group. However, it is unclear from the draft DAIP whether or how children and young people will be engaged in future WCHN programs and services, including whether they are part of the established Disability Advisory Group and whether they were engaged in the development of the draft DAIP.

WCHN has informed this Office that current members of the Disability Advisory Group are aged between 23 and 62 years old. This office recommends that WCHN explore how the final DAIP might strengthen opportunities for children and young people to have their voices heard.

Whether as members of the Disability Advisory Group, the youth engagement group or in another capacity, this Office recommends that the final DAIP outline how children and young people with disability will be supported to actively contribute to and inform decision making processes. This includes consultation and decision making that is not confined to “disability-specific” or “youth-specific” issues and may include:

- the delivery and evaluation of services;
- the training material for staff; and volunteers
- the design and function of the new Women’s and Children’s Hospital (WCH) and the work of the WCH Project Team.

Opportunities to participate should be culturally appropriate, well promoted and offered in a range of formats. To do this may require greater collaboration with other agencies in the SA Health portfolio as well as external youth-focused organisations with disability expertise.

Children and young people’s diverse and unique views, lives and experiences often differ from adult assumptions. They want to be listened to, not just for their disability but as children and young people and diverse individuals.

The things that children describe as making them feel included are as basic as being treated “like a human”. As remarkably simple as this is, young people’s experiences do not always reflect this, with many describing how small they feel when adults talk to them “like a dog” or in a condescending way “that makes them feel beneath you”. They describe the most helpful professionals as those who are kind, fun, trustworthy, understanding, listen and respect the child as an individual person.

- 2. That the final DAIP clarifies the purposes and risks associated with the proposed Disability Register.**

This office has reservations in relation to the proposed Disability Register to “assist in identifying people with lived experience for committees and advisory groups”. The final

DAIP would benefit from greater clarification regarding the purposes of and risks associated with such a Register.

For example, will the information gathered be used to inform research or service provision or both? How will it be used and how will the potential associated risks be addressed and mitigated? If the information is to be used for research purposes, it will require ethics consideration and approval.

If the Register is collecting any identifying information about children and young people with disability, it must ensure it respects every child's rights to privacy, dignity and information by:

- explaining what information is being collected and why (as well as any related policies or procedures) to the child, young person and their families and carers;
- only using collected information for the stated purpose;
- providing reasonable supports to facilitate the genuine inclusion and participation of this group.

3. That the final DAIP includes actions to review any existing feedback and complaints mechanisms to ensure that they are child-friendly and accessible for children and young people with disability.

Children and young people have consistently told me that they want organisations to be transparent and demonstrate accountability by ensuring that young people who have voiced their concerns or opinions are informed about the outcome of their feedback or complaint. They want staff to be kind and respectful and they want to know that service providers and organisations have the capacity to deal with issues properly, completely and with discretion.

This Office recommends that the WCHN final DAIP includes actions to review the accessibility of existing feedback or complaint mechanisms, procedures and policy for all children and young people with disability who wish to highlight systemic concerns and their families and carers.

Whatever their circumstances, children and young people overwhelmingly want someone they can trust and access to information that is clear, simple, detailed and unbiased. Having access to information that they understand is key to a child being able to participate fully, express concerns, provide feedback and access appropriate supports.

Actions in the draft DAIP under the "Accessible Communities" theme largely relate to physical environments and equipment. Safety and accessibility is about more than physical safety and accessibility – it is also influenced by social environments, opportunities, staff behaviours and attitudes.

The final DAIP would benefit from a broader commitment to all children and young people that ensures that information regarding support services, feedback and complaints mechanisms, and other policies, is made available and accessible to all children and young people with varying communication needs and levels of literacy.

The draft DAIP mentions the provision of an accessible health information pack that “can be brought in via South Australian Ambulance Service (SAAS) and be presented at Paediatric Emergency Department (PED)”. The final DAIP should clarify what information this information pack will include, who it is for, what it will be used for, whether it will be child-friendly and whether it will recognise the diversity of different disabilities.

4. That the review of Disability Awareness Training ensures that all staff training addresses the needs of children and young people with disability through trauma-informed and child-centred approaches.

Meaningful, extensive and ongoing disability awareness training is key to understanding disability, identifying disability-related need and responding appropriately.

This office welcomes WCHN's review of its Disability Awareness Training to ensure “ongoing compliance and appropriateness of content” and the introduction of “training for staff on how to care for consumers with disability” (draft Actions 1.2. and 1.3.). This training should:

- address how children and young people have diverse needs that often differ from adults and therefore require different responses;
- focus on children's rights and trauma-informed practice;
- improve attitudes and responses of staff across all services.

Training should also be developed and delivered by, or in collaboration with, the disability sector and other agencies with disability expertise. To this end, it is promising that the draft DAIP includes the Disability Advisory Group as a responsible party for the proposed review of Disability Awareness Training.